

*A Public Document*

Please type or print in ink

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NAME (LAST)	(FIRST)	DAYTIME TELEPHONE NUMBER
Howard	Emily	01 JAN -5 AM 9:28 (209) 369-2476
MAILING ADDRESS (May be business address)	STREET	CITY
852 Alder Pl.	LODI	CA. 95292
ZIP CODE		OPTIONAL FAX / E-MAIL ADDRESS
		CITY CLERK OF LODI

**COVER PAGE**

**1. Office, Agency, or Court**

Provide precise name. Do not use acronyms.

Lodi City Council

Division, Board, District, if applicable:

City Council Member

Position:

→ Expanded Statement – List agency/position:

(Attach a separate sheet if necessary. Do not use acronyms.)

Agency:

Position Title:

**2. Office Jurisdiction (Check one)**

State

County of \_\_\_\_\_

City of Lodi

Multi-County \_\_\_\_\_

Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

Assuming Office/Initial

Date: 12/6/00

Annual

(Check one)

The period covered is January 1, 1999, through December 31, 1999.

The period covered is \_\_\_\_\_, through December 31, 1999.

Leaving Office Date Left: \_\_\_\_\_

(Check one)

The period covered is January 1, 1999, through the date of leaving office.

The period covered is \_\_\_\_\_, through the date of leaving office.

Candidate

**4. Schedule Summary**

(Check applicable schedules or "No reportable interests.")

→ During the reporting period, did you have any reportable interests to disclose on:

Schedule A-1  Yes – schedule attached  
 Investments (Less than 10% Ownership)

Schedule A-2  Yes – schedule attached  
 Investments (Greater than 10% Ownership)

Schedule B  Yes – schedule attached  
 Real Property

Schedule C  Yes – schedule attached  
 Income & Business Positions (Income Other than Loans, Gifts, and Travel)

Schedule D  Yes – schedule attached  
 Income – Loans

Schedule E  Yes – schedule attached  
 Income – Gifts

Schedule F  Yes – schedule attached  
 Income – Travel Payments

→  No reportable interests

Total number of pages (including this cover page): 4

**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on January 5 2001  
 (month/day, year)

SIGNATURE Emily A Howard  
 (File the originally signed statement with your filing officer.)

mailed to FPPC on 1/9/01

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Name

NAME OF BUSINESS ENTITY  
Chevron

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Stock

FAIR MARKET VALUE  
 \$1,000 - \$10,000  
 \$10,001 - \$100,000  
 Over \$100,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ 99      \_\_\_\_\_ 99  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY  
Vanguard / LORD Abbett & Co.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
BOND

FAIR MARKET VALUE  
 \$1,000 - \$10,000  
 \$10,001 - \$100,000  
 Over \$100,000

NATURE OF INVESTMENT  
 Stock  
 Other BOND / Mutual Fund (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ 99      \_\_\_\_\_ 99  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY  
Union Carbide

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Stock

FAIR MARKET VALUE  
 \$1,000 - \$10,000  
 \$10,001 - \$100,000  
 Over \$100,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ 99      \_\_\_\_\_ 99  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY  
General Electric

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Stock

FAIR MARKET VALUE  
 \$1,000 - \$10,000  
 \$10,001 - \$100,000  
 Over \$100,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ 99      \_\_\_\_\_ 99  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY  
Praxair

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Stock

FAIR MARKET VALUE  
 \$1,000 - \$10,000  
 \$10,001 - \$100,000  
 Over \$100,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ 99      \_\_\_\_\_ 99  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY  
Washington Mutual

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Liquid Asset / Statement Savings

FAIR MARKET VALUE  
 \$1,000 - \$10,000  
 \$10,001 - \$100,000  
 Over \$100,000

NATURE OF INVESTMENT  
 Stock  
 Other Savings (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ 99      \_\_\_\_\_ 99  
 ACQUIRED                  DISPOSED

Comments:

Income & Business Positions

(Income Other than Loans, Gifts, and Travel Payments)

Name

NAME OF SOURCE: Lodi Memorial Hospital; ADDRESS: Fairmont St. Lodi, CA.; BUSINESS ACTIVITY: Medical; YOUR BUSINESS POSITION: Physical Therapist Assistant; GROSS INCOME RECEIVED: Over \$10,000; CONSIDERATION FOR WHICH INCOME WAS RECEIVED: Salary

NAME OF SOURCE; ADDRESS; BUSINESS ACTIVITY, IF ANY, OF SOURCE; YOUR BUSINESS POSITION; GROSS INCOME RECEIVED; CONSIDERATION FOR WHICH INCOME WAS RECEIVED

NAME OF SOURCE: City of Lodi; ADDRESS; BUSINESS ACTIVITY, IF ANY, OF SOURCE; YOUR BUSINESS POSITION: Council Member; GROSS INCOME RECEIVED: \$1,001 - \$10,000; CONSIDERATION FOR WHICH INCOME WAS RECEIVED: Salary

NAME OF SOURCE; ADDRESS; BUSINESS ACTIVITY, IF ANY, OF SOURCE; YOUR BUSINESS POSITION; GROSS INCOME RECEIVED; CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Comments:

**Income - Loans**  
 (Received or Outstanding)

NAME OF LENDER Volvo Finance  
 ADDRESS \_\_\_\_\_  
 BUSINESS ACTIVITY OF LENDER  
 Financial Institution  
 Other \_\_\_\_\_  
 INTEREST RATE 5.9%  None TERM (Months/Years) 48 months  
 HIGHEST BALANCE DURING REPORTING PERIOD  
 \$250 - \$1,000  \$1,001 - \$10,000  Over \$10,000  
 SECURITY FOR LOAN  
 None  Automobile  Personal residence  
 Real Property \_\_\_\_\_  
Street address  
 \_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

NAME OF LENDER \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 BUSINESS ACTIVITY OF LENDER  
 Financial Institution  
 Other \_\_\_\_\_  
 INTEREST RATE \_\_\_\_\_%  None TERM (Months/Years) \_\_\_\_\_  
 HIGHEST BALANCE DURING REPORTING PERIOD  
 \$250 - \$1,000  \$1,001 - \$10,000  Over \$10,000  
 SECURITY FOR LOAN  
 None  Automobile  Personal residence  
 Real Property \_\_\_\_\_  
Street address  
 \_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

NAME OF LENDER Bank of Stockton  
 ADDRESS \_\_\_\_\_  
 BUSINESS ACTIVITY OF LENDER  
 Financial Institution  
 Other \_\_\_\_\_  
 INTEREST RATE \_\_\_\_\_%  None TERM (Months/Years) \_\_\_\_\_  
 HIGHEST BALANCE DURING REPORTING PERIOD  
 \$250 - \$1,000  \$1,001 - \$10,000  Over \$10,000  
 SECURITY FOR LOAN  
 None  Automobile  Personal residence  
 Real Property \_\_\_\_\_  
Street address  
 \_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

NAME OF LENDER \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 BUSINESS ACTIVITY OF LENDER  
 Financial Institution  
 Other \_\_\_\_\_  
 INTEREST RATE \_\_\_\_\_%  None TERM (Months/Years) \_\_\_\_\_  
 HIGHEST BALANCE DURING REPORTING PERIOD  
 \$250 - \$1,000  \$1,001 - \$10,000  Over \$10,000  
 SECURITY FOR LOAN  
 None  Automobile  Personal residence  
 Real Property \_\_\_\_\_  
Street address  
 \_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_



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01 FEB -5 AM 10:29

**FAIR POLITICAL PRACTICES COMMISSION**

SUSAN J. LEONARD  
CITY CLERK  
CITY OF LODI  
P.O. Box 807 • 428 J Street • Sacramento, CA 95812-0807  
(916) 322-5660 • Fax (916) 322-0886

February 1, 2001

Emily Howard  
City Council Member  
City of Lodi  
852 Alder Place  
Lodi, California 95242

Re: Statement of Economic Interests  
Type of Statement: Assuming Office  
Date Filed: January 5, 2001

Dear Ms. Howard:

The Fair Political Practices Commission received your statement of economic interests (Form 700). A review of your statement indicates that further information is required as explained on the attachment.

The enclosed amendment schedule should be completed within 20 days and returned to Jennifer Perrin, City of Lodi, who will retain a copy and forward the original to the Fair Political Practices Commission. Please retain a copy of the amendment schedule for your records to assist you in completing future statements of economic interests.

Please note that our review of your statement does not constitute an in depth audit and your compliance with this request for amendment information or correction does not relieve you of responsibility for the overall accuracy and completeness of your statement as required by law.

We are here to assist you. If you have any questions, please call me at (916) 324-3722.

Sincerely,

A handwritten signature in cursive script that reads "Tara L. Stock".

Tara L. Stock  
Staff Services Analyst  
Technical Assistance Division

cc: Jennifer Perrin

Attachment for letter to:  
Emily Howard

February 1, 2001  
FPPC: 916.322.5660

We have listed below information in your statement of economic interests (Form 700) which may require correction or clarification:

On Schedule D-Income-Loans, you reported a loan from Bank of Stockton. However, you did not report the interest rate on the loan. In addition, you did not report the term of the loan. (The term of a loan is the number of months or years given for repayment of the loan, e.g., a five-year car loan.)

Income - Loans

(Received or Outstanding)

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01 MAR 13 PM 1:40

AMENDMENT

NAME OF LENDER JUSAN J. BLACKSTON  
Bank of Stockton  
ADDRESS CITY OF LODI  
PO Box 1110 Stockton, CA 95201

BUSINESS ACTIVITY OF LENDER  
 Financial Institution  
 Other \_\_\_\_\_

INTEREST RATE 9%  None TERM (Months/Years) 68 months  
*Car Loan*

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$250 - \$1,000  \$1,001 - \$10,000  Over \$10,000

SECURITY FOR LOAN NA  
 None  Automobile  Personal residence

Real Property \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
(Describe)

NAME OF LENDER \_\_\_\_\_

ADDRESS \_\_\_\_\_

BUSINESS ACTIVITY OF LENDER  
 Financial Institution  
 Other \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %  None TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$250 - \$1,000  \$1,001 - \$10,000  Over \$10,000

SECURITY FOR LOAN  
 None  Automobile  Personal residence

Real Property \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
(Describe)

NAME OF LENDER \_\_\_\_\_

ADDRESS \_\_\_\_\_

BUSINESS ACTIVITY OF LENDER  
 Financial Institution  
 Other \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %  None TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$250 - \$1,000  \$1,001 - \$10,000  Over \$10,000

SECURITY FOR LOAN  
 None  Automobile  Personal residence

Real Property \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
(Describe)

**Verification**

PRINT NAME Emily Howard

CITY, COUNTY, COURT OR AGENCY LODI City Council

STATEMENT TYPE  99/2000 Annual  Assuming  Leaving  
 Annual  Candidate  
*(or)*

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on March 13, 2001  
(month, day, year)

SIGNATURE Emily A. Howard

Comments: \_\_\_\_\_

Mailed to FPPC on 3/13/01